Slater & Matsil, L.L.P.

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Facsimile Number: 703-872-9306

Transmission Date:

February 4, 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Tu

Docket No.:

TSM03-0498

Serial No:

10/729,084

Art Unit:

TBD

Date Filed:

December 5, 2003

TITLE:

Method of Forming a PIP Capacitor

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being transmitted by facsimile to the U.S. Patent and Trademark Office at on the date shown above:

- Certification of Facsimile Transmission (1 page)
- Supplemental Declaration Transmittal (1 page)
- Supplemental Declaration for Utility Patent Application (2 pages)

Respectfully submitted,

Legal Assistant

Confirmation Respectfully Requested

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Attorney Docket: TSM03-0498

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Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450



SUPPLEMENTAL DECLARATION TRANSMITTAL

Dear Sir:

Attached hereto is a Supplemental Declaration for Utility Patent Application, signed by the Applicant on January 30, 2004. The attached is submitted because minor changes were made to the specification between the date the Applicant signed the Declaration and Power of Attorney, November 19, 2003, and the date the application was filed, December 5, 2003. Thus, the Supplemental Declaration is submitted as the Applicant's acknowledgement of those changes.

Respectfully submitted,

February 4, 2004

Date

Aftorney for Applicant

Reg. No. 38,495

Slater & Matsil, L.L.P. 17950 Preston Rd., Suite 1000 Dallas, TX 75252 (972) 732-1001 (phone) (972) 732-9218 (fax)

PTC/SB/04 (06-03)
Approved for use through 07/31/2003. OMS 0851-0032
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SUPPLEMENTAL **DECLARATION FOR UTILITY** OR DESIGN PATENT APPLICATION (37 CFR 1.67)

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Attorney Docket Numb	DEF TSM03-0498					
First Named Inventor	Tu					
	COMPLETE IF KNOWN					
Application Number	10/729,084					
Filing Date	12/5/2003					
Art Unit	TBD					
Examiner Name	TBD					

I hereby declare that:		•••						
Each inventor's residence, mail	ing address, and citizenship	are as stated below next to the	ir name.					
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which claimed and for which a patent is sought on the invention entitled:								
Method of Forming a PIP Cap	ecitor							
				Į.				
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		tie of the Invention)						
the specification of which	,.	are or the inventory						
is attached hereto								
OR _								
was filed on (MM/DD/YY	ΥΥ) December 5, 2003	as United Str	ates Application Num	nber or PCT International				
Application Number 10/729	,084	and was amended on (MM/DD/Y	YYY) N/A]				
I hereby declare that the subject		hed amendment mendr original application, above Ident	nent filed on	was part of				
	_							
any amendment specifically ref	ved and understand the con erred to above.	tents of the above-identified spe	elfication, including	the claims, as amended by				
I acknowledge the duty to disch	ose information which is ma	terial to patentability as defined	in 37 CFR 1 56 inc	tuding for continuation in				
part applications, material infor- international filing date of the or	nation which became avails	ible between the filing date of the	e prior application s	and the national or PCT				
I hereby claim foreign priority t	penefits under 35 U.S.C. 11	19(a)-(d) or (f), or 365(b) of any International application which o	foreign application	n(s) for patent, inventor's or				
United States of America, Issue	I DEKOW AND DAME RISK IDARO	man nesow by checking the ho	Y DAY CAMBAN BANK	icofian fat neten) inventori				
priority is distined.	ane(s), or or any PC1 inter	national application having a filir	ng date betone that	of the application on which				
Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority	Certified Copy Attached?				
Number(8)	<u> </u>	(MM/DD/YYYY)	Not Claimed	YES NO				
•								
Additional foreign application	numbers are listed on a supple	mental priority data sheet PTC/SB/02	B attached hereto:	· · · · · · · · · · · · · · · · · · ·				

[Page 1 of 2]

[Fage 1 or 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.53. The information is required to obtain or retain a benefit by the public which is to fife (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Traditions Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.

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SUPPLEMENTAL DECLARATION - UTILITY OR DESIGN PATENT APPLICATION

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Direct all correspondence to:	P	259	62	_{ОР} 🗆	Соптеврог	ndence address below				
Name Steven H. Slater										
Address 17950 Preston Rd.							······································			
Address Suite 1000										
City Dallas		State Texas		ZIP 75252-6793						
		Telephons 972-732-1001		Fax 972-732-9218						
I hereby declare that all statements made herein of my own knowledge are true and that all atatements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
Name of Sole or First Inventor:										
Given Name Family Nam (first and middle [if any]) Kuo-Chi or Surname					Tu					
Inventor's Kao-Chi Tu Date 1/30 /5002										
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11 \		State Telwan					cuntry LO.C.			
Name of Second Inventor:	A petiti	on has been fi	led for	this unsigne	d inventor					
liven Name irst and middle [if any]) N/A			Family Name or Surname N/A							
Inventor's Signature							Date			
Residence: City		State			Country	C	itizenship			
Mailing Address										
City	State				ZIP	C	Country			
Additional inventors or a legal representative are being named on the _0_ supplemental sheet(s) PTO/SS/02A or 02LR attached hereto.										